



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

JUN-9 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 205044	DATE OF INSPECTION 06-03-09
LOCATION OF INSTRUMENT (STREET AND CITY) ROCK HILL POLICE DEPT, 320 W THORNTON, ROCK HILL, MO	TIME OF INSPECTION 21:19

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 50 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE 21:19 06/03/09	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C)	
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 <input checked="" type="checkbox"/> .099	TEST 2 <input checked="" type="checkbox"/> .099	TEST 3 <input checked="" type="checkbox"/> .099
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)						
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)						
REFUSALS <input type="checkbox"/>	(0-.04) <input type="checkbox"/>	(.05-.09) <input type="checkbox"/>	(.10-.14) <input type="checkbox"/>	(.15-.19) <input type="checkbox"/>	(Over .19) <input type="checkbox"/>	

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

INSTRUMENT WITHIN DEPARTMENT OF HEALTH SPECIFICATIONS
ETHANOL VAPOR CONCENTRATION 0.10%

SOLUTION MANF: GUTH LABS SOLUTION LOT # 08400 EXPIRES: 12-08-09

INSPECTING OFFICER

SIGNATURE 	PRINT NAME JORDEN LEWIS
TYPE II PERMIT NUMBER/EXPIRATION DATE 720178 08-27-09	TELEPHONE NUMBER (314) 962-6600



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **08400** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1204** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **December 8, 2009** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ROCK HILL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 263844
66/83/89

ARREST TIME: 20:30
SUBJECT NAME:
SMITH/ROBERT
DOB: 12/09/78 SEX: M
STATE/D.L.: MO/1R0456789
ARRESTING OFFICER:
LEWIS/JORDEN
OFFICER I.D.: 264
TESTING OFFICER:
LEWIS/JORDEN
OFFICER I.D.: 264
PERMIT NUMBER: 726178
EXPIRATION DATE: 06/27/89
MISCELLANEOUS DATA:
RADIO INTERFERENCE TEST

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ROCK HILL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 263844
66/83/89

TESTING OFFICER:
LEWIS/JORDEN
OFFICER I.D.: 264
PERMIT NUMBER: 726178
EXPIRATION DATE: 06/27/89
MISCELLANEOUS DATA:
MONTHLY MAINTENANCE CHECK

--- SUPERVISOR MODE ---

BLANK TEST	.000	21:14
INTERNAL STANDARD	VERIFIED	21:14
EXTERNAL STANDARD	.899	21:14
BLANK TEST	.000	21:15
EXTERNAL STANDARD	.899	21:15
BLANK TEST	.000	21:16
EXTERNAL STANDARD	.899	21:16
BLANK TEST	.000	21:17

N = 3
SIN. = .1
AVG. = .899

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

BAC DataMaster

STATE OF MISSOURI -
MISSOURI STATE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203044
06/03/09
21:11

DIAGNOSTIC CHECK

COMPUTER: OKAY

PROOF: Q.E.D.

SAMPLE CHAMBER: 50L

FLOW DETECTORS: OKAY

NAME
 HIGH SPEED OKAY

DELLING 1847

FILED: MAY

QUARTZ STEADFAST DEFEAT

CULTURE (10%) ORG:

PREFACE

```
#4%00+,-./0123456789:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUWXYZ[\]^_`abcedefghijklmno  
pqrs tuvxyz{|}~"
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OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II



JORDEN G. LEWIS

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

08/27/07

Date

720178

Number

08/27/2009

Expires

Eric C. Poland

Director of State Public Health Laboratory

[Signature]

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)